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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input checked="" type="checkbox"/> Declaration Submitted with Initial Filing OR <input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16(e)) required)		Attorney Docket Number	BP 3210
		First Named Inventor	Greg Efland
		COMPLETE IF KNOWN	
		Application Number	
		Filing Date	
		Group Art Unit	
		Examiner Name	

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first, and sole inventor (if only one name is listed below) or an original, first, and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

SHARED ANTENNA CONTROL

the specification of which
☒ is attached hereto
 OR
☐

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information, which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 3659a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

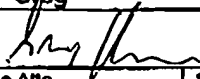
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DECLARATION - Utility or Design Patent Application

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U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

<input type="checkbox"/> Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto									
Direct all correspondence to: <input type="checkbox"/> Customer Number or Bar Code Label OR <input checked="" type="checkbox"/> Correspondence address below									
Name	Bruce E. Garlick								
Address	Garlick, Harrison & Markison, LLP								
Address	P.O. Box 160727								
City	Austin	State	TX	Zip	78716-0727				
Country	US	Telephone	(512) 264-8816	Fax	(512) 264-3735				
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.									
Name of First Inventor:		<input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name (first and middle (if any))					Family Name or Surname				
Greg					Eiland				
Inventor's Signature								Date	3/24/2004
Residence: City	Palo Alto	State	CA	Country	US	Citizenship	US		
Post Office Address	2225 Ramona St.								
Post Office Address									
City	Palo Alto	State	CA	Zip	94301	Country	US		
Name of Second Inventor:		<input type="checkbox"/> A petition has been filed for this unsigned inventor							
Given Name (first and middle (if any))					Family Name or Surname				
David					Fifield				
Inventor's Signature								Date	
Residence: City	San Jose	State	CA	Country	US	Citizenship	UK		
Post Office Address	14730 Charmeran Avenue								
Post Office Address									
City	San Jose	State	CA	Zip	95124-3571	Country	US		

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Country		US			Telephone		(512) 264-8818		Fax		(512) 264-3735				
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Greg						Efland									
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City		Palo Alto		State		CA		Zip		94301		Country		US	
Name of Second Inventor:				<input type="checkbox"/> A petition has been filed for this unsigned inventor											
Given Name (first and middle (if any))						Family Name or Surname									
David						Fifield									
Inventor's Signature				David Fifield						Date		3/26/04			
Residence: City		San Jose		State		CA		Country		US		Citizenship		UK	
Post Office Address		14730 Chameran Avenue													
Post Office Address															
City		San Jose		State		CA		Zip		95124-3571		Country		US	